POSITION	INITIALS	ID NO.	DATE	
FEE DETERMINATION	· J.		<u> </u>	
O.I.P.E. CLASSIFIER			11- 0;	
FORMALITY REVIEW	SIA	1285	0-07-02	
RESPONSE FORMALITY REVIEW	Ket	[019	03-22-0	

## INDEX OF CLAIMS

	Rejected	N	
_	Allowed (Through numeral) Canceled	Α	Appeal Objected

Claim Date	Cli	aim	Date		Claim	Date
			TTT		<u>a</u>	
Original		Original	111		Final Original	
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-   7	<del>- - - - -</del>	57			107	
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		59			109	
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20				++++	121	
21		71	$\vdash$	<del>                                     </del>	122	
(22)		72		++++	123	
23		73			124	<del>╞╶╎╸┝╶┝╸┝</del> ╶┼
24		74				<del>├─┼─┼─┼</del>
25)		75			125	<del>┡╶┋</del> ╌┞
(26)		76			126	<del></del>
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29	<del>┞╸┩┈┡╸</del> ┼╌┼╾┤╴├╸	80	<del>  -   -   -  </del>		130	
30	<del>┇┋┋┋</del>	81	+-+-	++++	131	
31			<del>┤╶┤╶</del> ┞═┼		132	
32	<del></del>	82	┾╌┼╌┼	<del></del>	133	
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34		84	<del>                                     </del>	<del></del>	135	
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38	<del>                                     </del>	88			138	
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49			<del></del>		150	
50		100				

If more than 150 claims or 10 actions staple additional sheet here